

GEORGIA STATE BOARD OF VETERINARY MEDICINE

**Board Meeting Minutes
Professional Licensing Boards
237 Coliseum Drive, Macon, GA
August 12, 2015 - 9:30 a.m.**

The Georgia State Board of Veterinary Medicine met on Wednesday, August 12, 2015. The following members were present:

Board Members Present

Dr. Beckey Malphus, President
Dr. Larry Corry
Dr. Edsel Davis
Dr. Henry Bohn
Dr. John Sundstrom
Mr. Jeff Smith

Staff Present

Ms. Adrienne Price, Executive Director
Ms. Tamara Elliott, Board Support Specialist
Ms. Kathy Osier, Licensing Supervisor

Attorney General's Office

Amelia Baker, Senior Assistant Attorney General
(via teleconference)

Visitors Present

Scott Piper, Georgia Veterinary Medical Association (GVMA)
Christopher Knopp

Call to Order Dr. Malphus established a quorum and called the meeting to order at 9:36 a.m.

OPEN SESSION

Agenda Dr. Corry motioned, Dr. Davis seconded and the Board voted unanimously in favor of the motion to accept the agenda as presented.

Open Session Board Minutes

1) June 17, 2015 Board Meeting

Dr. Corry motioned, Dr. Davis seconded and the Board voted unanimously in favor of the motion to approve the June 17, 2015 Board Meeting minutes as presented.

2) August 11, 2015 Investigative Committee

Dr. Corry motioned, Dr. Davis seconded and the Board voted unanimously in favor of the motion to approve the August 11, 2015 Board Meeting minutes as presented.

10:00a.m. Board Rule Hearing 700-8-.01

**SYNOPSIS OF PROPOSED CHANGES TO THE GEORGIA STATE BOARD OF VETERINARY MEDICINE
RULE FOR CHAPTER 700-8, UNPROFESSIONAL CONDUCT, RULE 700-8-.01, UNPROFESSIONAL
CONDUCT.**

Purpose: To further define patient veterinarian relationship.

Main Features: Further clarify 700-8-.01(d)(2)(3).

**DIFFERENCES BETWEEN THE EXISTING RULE AND THE PROPOSED AMENDMENTS TO THE
GEORGIA STATE BOARD OF VETERINARY MEDICINE RULE FOR CHAPTER 700-8,
UNPROFESSIONAL CONDUCT, RULE 700-8-.01, UNPROFESSIONAL CONDUCT.**

[Note: underlined text is proposed to be added; lined-through text is proposed to be deleted.]

700-8-.01 Unprofessional Conduct

Within the meaning of Ga. Code subsection 43-50-21(a)(7), unprofessional conduct means:

(a) Advertising – defined: Advertising shall mean any information communicated in a manner designed to attract public attention to the practice of the licensee or registrant. Advertising shall include but not be limited to, a communication, published or displayed through the use of newspaper, internet, telephone directory, pamphlets or handouts, radio, television, signs, billboard, window display or any other means of medium.

1. A licensee or registrant shall not make any false, misleading or deceptive communication in any form of advertising.
2. Advertisement of prices must contain a complete description of veterinary services included in any advertised price and disclosure of any extra charges that may be required to serve the consumer's needs.

(b) Professional Relationships:

1. It shall be unprofessional conduct for a licensee or registrant without just cause and in bad faith or for the purpose of soliciting patronage or personal pecuniary gain to disparage the profession or professional capabilities of another licensee or registrant.
2. It shall be unprofessional conduct to aid any person, firm, or corporation to engage in the unauthorized practice of veterinary medicine.
3. It shall be unprofessional conduct for a licensee or registrant to guarantee a cure or to offer his name in a commercial setting in a testimonial as to virtues of proprietary remedies or foods.
4. Consultation by an attending veterinarian with other veterinarians expert in the particular matter on which consultation is sought is in the public interest and thus is expected of the attending veterinarian when the need arises. But such consultation is discouraged if the consulting veterinarian employs the relationship so created to disparage the attending veterinarian or to solicit business; such practices are not in the public interest.
 - (i) It shall therefore be unprofessional conduct for a licensee called as a consulting veterinarian to disparage in the presence of the client the competence of the attending veterinarian. The Board does, however, expect any incompetence or negligence to be reported to it and nothing in this rule prohibits such reports or the giving of testimony in public or private litigation.
 - (ii) It shall be unprofessional conduct for a consulting veterinarian to assume unauthorized control of the case or to utilize the consulting relationship to solicit business for himself or others.
5. It shall be unprofessional conduct for a licensee employed to render professional advice by one party in negotiations concerning the sale of an animal to accept to a fee from the other party.

(c) Failure to Maintain Patient Records:

1. A veterinarian shall prepare and maintain a record reflecting the care and treatment of animals treated.
2. These records shall contain clinical information sufficient to justify the diagnosis and warrant treatment and shall, if applicable, include but not be limited to the following information:
 - (i) Name, address and telephone number of the animal's owner;
 - (ii) Name of attending veterinarian and staff rendering care;
 - (iii) Patient identification, including name, ages, sex and breed;
 - (iv) Dates of examination, treatment and custody of the animal;
 - (v) Patient history;
 - (vi) Presenting complaint;
 - (vii) Vaccination history;
 - (viii) Findings from physical examination, including temperature and weight;
 - (ix) Clinical lab reports, if applicable;
 - (x) Medication and treatment, including frequency;
 - (xi) Anesthetic, including type and amount, if applicable;
 - (xii) Details of surgical procedure with complications and/or abnormalities noted, if applicable; (xiii) Progress and disposition of the case;
 - (xiv) Differential diagnoses; and
 - (xv) X-rays if applicable.
3. All records shall be kept in a readily retrievable form, shall be recorded contemporaneously, and shall be filed promptly following treatment.
4. Patient records shall be kept by a veterinarian for three (3) years after a patient's last visit, notwithstanding any other provisions of law.
5. Copies of patient records must be made available to the owner of the animal upon written request to the veterinarian who treated the animal or to the veterinarian facility where the treatment was provided. Such records must be made available within ten (10) business days from request. The veterinarian may charge a reasonable charge for the search, retrieval, duplication and, if applicable, mailing of the patient records.
6. Failure to keep records as required by this subparagraph shall constitute a failure to conform to the minimal standards of acceptable and prevailing veterinary medical practice.

(d) Failure to have an appropriate Veterinarian/Client/Patient Relationship. An appropriate veterinarian/client/patient relationship will exist when:

1. The veterinarian has assumed the responsibility for making medical judgments regarding the health of the animal(s) and the need for medical treatment, and the client (owner or other caretaker) has agreed to follow the instructions of the veterinarian;
2. There is sufficient knowledge of the animal(s) by the veterinarian to initiate at least a general or preliminary diagnosis of the medical condition of the animal(s). This means that the veterinarian ~~has seen the animal within the last twelve (12) months and is personally acquainted with the keeping and care of the animal(s) by virtue of: an examination of the animal(s), and/or by medically appropriate and timely visits to the premises where the animal(s) are kept; and~~ (i) an examination of the animal by the veterinarian within the last twelve (12) months, or (ii) medically appropriate and timely visits by the veterinarian to the premises where the patient is kept;
3. A veterinarian/client/patient relationship has not been established solely by telephone, computer or other electronic means; and
34. ~~When the practicing~~ A licensed veterinarian is readily available for follow-up in case of adverse reactions or failure of the regimen of therapy.

(e) Prescription Drugs:

1. After a valid veterinary/client/patient relationship has been established, a veterinarian must make available, upon request, at a reasonable cost, a written prescription.
2. It is unlawful for a veterinarian to release, prescribe, and/or dispense any prescription drugs without having ~~examined the animal and~~ established a valid veterinary/client/patient relationship.

Authority of §§ 43-1-25, 43-50-21, 43-50-3, 43-1-19 and 43-50-41.

Written Comments Received

No written comments were received.

Public Comments Received

No Public comments were received or offered during the hearing.

Dr. Bohn motioned, Dr. Sundstrom seconded and the Board voted unanimously in favor of the motion to adopt the 700-8-.01 proposed amendment as presented.

Dr. Bohn motioned, Dr. Sundstrom seconded and the Board voted unanimously in favor of the motion that the formulation and adoption of this rule does not impose excessive regulatory cost on any licensee and any cost to comply with the proposed rule cannot be reduced by a less expensive alternative.

The hearing adjourned at 10:02 a.m.

Licenses to Ratify June 9, 2015-August 5, 2015

Dr. Davis motioned, Dr. Sundstrom seconded and the Board voted unanimously in favor of the motion to ratify licenses issued from June 9, 2015-August 5, 2015.

Board Rule Discussion – 700-8-.01 Unprofessional Conduct

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1. A licensee or registrant shall not make any false, misleading or deceptive communication in any form of advertising.
2. Advertisement of prices must contain a complete description of veterinary services included in any advertised price and disclosure of any extra charges that may be required to serve the consumer's needs.

(b) Professional Relationships:

1. It shall be unprofessional conduct for a licensee or registrant without just cause and in bad faith or for the purpose of soliciting patronage or personal pecuniary gain to disparage the profession or professional capabilities of another

licensee or registrant.

2. It shall be unprofessional conduct to aid any person, firm, or corporation to engage in the unauthorized practice of veterinary medicine.

3. It shall be unprofessional conduct for a licensee or registrant to guarantee a cure or to offer his name in a commercial setting in a testimonial as to virtues of proprietary remedies or foods.

4. Consultation by an attending veterinarian with other veterinarians expert in the particular matter on which consultation is sought is in the public interest and thus is expected of the attending veterinarian when the need arises. But such consultation is discouraged if the consulting veterinarian employs the relationship so created to disparage the attending veterinarian or to solicit business; such practices are not in the public interest.

(i) It shall therefore be unprofessional conduct for a licensee called as a consulting veterinarian to disparage in the presence of the client the competence of the attending veterinarian. The Board does, however, expect any incompetence or negligence to be reported to it and nothing in this rule prohibits such reports or the giving of testimony in public or private litigation.

(ii) It shall be unprofessional conduct for a consulting veterinarian to assume unauthorized control of the case or to utilize the consulting relationship to solicit business for himself or others.

5. It shall be unprofessional conduct for a licensee employed to render professional advice by one party in negotiations concerning the sale of an animal to accept a fee from the other party.

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(i) Name, address and telephone number of the animal's owner; (ii) Name of attending veterinarian and staff rendering care;

(iii) Patient identification, including name, ages, sex and breed; (iv) Dates of examination, treatment and custody of the animal; (v) Patient history;

(vi) Presenting complaint;

(vii) Vaccination history;

(viii) Findings from physical examination, including temperature and weight; (ix) Clinical lab reports, if applicable;

(x) Medication and treatment, including frequency;

(xi) Anesthetic, including type and amount, if applicable;

(xii) Details of surgical procedure with complications and/or abnormalities noted, if applicable; (xiii) Progress and disposition of the case;

(xiv) Differential diagnoses; and

(xv) X-rays if applicable.

3. All records shall be kept in a readily retrievable form, shall be recorded contemporaneously, and shall be filed promptly following treatment.

4. Patient records shall be kept by a veterinarian for three (3) years after a patient's last visit, notwithstanding any other provisions of law.

5. Copies of patient records must be made available to the owner of the animal upon written request to the veterinarian who treated the animal or to the veterinarian facility where the treatment was provided. Such records must be made available within ten (10) business days from request. The veterinarian may charge a reasonable charge for the search, retrieval, duplication and, if applicable, mailing of the patient records.

6. Failure to keep records as required by this subparagraph shall constitute a failure to conform to the minimal standards of acceptable and prevailing veterinary medical practice.

(d) Failure to have an appropriate Veterinarian/Client/Patient Relationship. An appropriate veterinarian/client/patient relationship will exist when:

1. The veterinarian has assumed the responsibility for making medical judgments regarding the health of the animal(s) and the need for medical treatment, and the client (owner or other caretaker) has agreed to follow the instructions of the veterinarian;

2. There is sufficient knowledge of the animal(s) by the veterinarian to initiate at least a general or preliminary

diagnosis of the medical condition of the animal(s). This means that the veterinarian is personally acquainted with the keeping and care of the animal(s) by virtue of:

- (i) an examination of the animal by the veterinarian within the last twelve (12) months, or
- (ii) medically appropriate and timely visits by the veterinarian to the premises where the patient is kept;

3. A veterinarian/client/patient relationship cannot be established solely by telephone, computer or other electronic means: and

4. A licensed veterinarian is readily available for follow-up in case of adverse reactions or failure of the regimen of therapy.

(e) Prescription Drugs:

1. It is unlawful for a veterinarian to release, prescribe, and/or dispense any prescription drugs without having established a valid veterinary/client/patient relationship. ~~After a valid veterinary/client/patient relationship has been established, a veterinarian must make available, upon request, at a reasonable cost, a written prescription.~~

2. After a valid veterinary/client/patient relationship has been established, a veterinarian must make available, upon request, at a reasonable cost, a written prescription. ~~It is unlawful for a veterinarian to release, prescribe, and/or dispense any prescription drugs without having established a valid veterinary/client/patient relationship.~~

Authority of §§ 43-1-25, 43-50-21, 43-50-3, 43-1-19 and 43-50-41.

Dr. Davis motioned, Dr. Sundstrom seconded and the Board voted unanimously in favor of the motion to refer the proposed amendment to Board Rule 700-12-.04 to the Attorney General's Office for a memorandum of authority and if no objections noted, vote to post.

Dr. Davis motioned, Dr. Sundstrom seconded and the Board voted unanimously in favor of the motion that the formulation and adoption of this rule does not impose excessive regulatory cost on any licensee and any cost to comply with the proposed rule cannot be reduced by a less expensive alternative.

Board Rule Discussion – 700-12-.04 Record Keeping

700-12-.04 Record Keeping.

(1) Complete, accurate and legible records must be maintained on all animals, or animal groups, including but not limited to, animal owner information, animal identification, and veterinary care.

(a) All records must be maintained for a minimum of 3 years (including diagnostic imaging and other patient data).

(b) The requirements of subparagraph (a) of this paragraph shall not apply to:

(i) A veterinarian who has retired from or sold his or her professional practice if such provider has notified the client of such retirement or sale and offered to provide such items in the associated patient's record or copies thereof to another provider of the client's choice or ~~The veterinarian must~~ furnished clients with an established mailing address to submit a request to for obtaining the associated patient's medical records; or

(ii) A veterinary facility with licensed veterinarians in its employ which shall retain copies of patient records in accordance with the rules and regulations for the veterinary facility; or

(c) A veterinarian who is found to have failed to notify a client of retirement or sale and offer a means to obtain a copy of the associated patient records may be subject to disciplinary action as determined by the Board.

Authority O.C.G.A. Secs. 43-1-25, 43-50-21, 43-50-41. History. Original Rule entitled "Record Keeping" adopted. F. Apr. 8, 2004; eff. Apr. 28, 2004.

Dr. Sundstrom motioned, Dr. Corry seconded and the Board voted unanimously in favor of the motion to refer the proposed amendment to Board Rule 700-12-.04 to the Attorney General's Office for a memorandum of authority and if no objections noted, vote to post.

Dr. Davis motioned, Mr. Smith seconded and the Board voted unanimously in favor of the motion that the formulation and adoption of this rule does not impose excessive regulatory cost on any licensee and any cost to comply with the proposed rule cannot be reduced by a less expensive alternative.

Correspondence – Dr. Rob and Dr. Pam Milligan – Medical Records

Dr. Davis motioned, Dr. Sundstrom seconded and the Board voted unanimously in favor of the motion to refer the writer to Board Rules 700-8-.01 and 700-12-.04 regarding minimum requirements for record keeping.

Correspondence – Leticia Dantas – Scope of Practice – Consultancy in Veterinary Medicine

Dr. Sundstrom motioned, Dr. Bohn seconded and the Board voted unanimously in favor of the motion to refer Ms. Dantas to O.C.G.A. § 43-50-44(5)(D) regarding the practice of veterinary medicine.

Discussion – 2015 FARB Regulatory Law Seminar

The Board accepted the correspondence in reference to 2015 FARB Regulatory Law Seminar as information.

Discussion – AAVSB 2015 Nominating Committee Report

The Board accepted the correspondence in reference to AAVSB 2015 nominating committee as information.

Discussion – AAVSB Revised RACE Standards

The Board recommended reviewing and discussing the Board's CE requirements as it relates to the revised RACE Standards at their next scheduled Board Meeting. The Board accepted the correspondence in reference to AAVSB Revised RACE Standards as information.

Discussion – AAVSB Welcomes New Executive Director

The Board accepted the correspondence in reference to AAVSB new Executive Director as information.

Discussion – AVMA Legislative Report

The Board accepted the correspondence in reference to AVMA Legislative as information.

Discussion – CVTEA Spring/Summer Newsletter

The Board accepted the correspondence in reference to CVTEA newsletter as information.

Executive Director's Report – A. Price

Executive Director's report presented the Board with statistical data relevant to the processing of applications and complaints/compliance. Ms. Price notified the Board that the Executive Directors were asked to notify the Secretary of State's Attorney for Elections and Legislation of any potential legislation that may be under consideration for each Board, no matter what stage in the process. Ms. Price informed Board Members that she currently had on her list for the Board to amend O.C.G.A. § 43-50-32(b) as well as the cleanup of language within other areas of the statute as some of the lines are no longer relevant. Ms. Price shared that the majority of the healthcare boards have shown an interest in requiring all applicants to complete a Fingerprint Criminal Background Check. The consensus of the Board was that those matters were of concern to the Board. Dr. Malphus mentioned that she would like the Board to be able to take some type of additional action against unlicensed practice and would like to add that to the list. Ms. Price also discussed other relevant topics regarding potential legislative initiatives, changes within the structure of the Professional Licensing Boards Division, and changes made to the website as it relates to the posting of Public Board Orders/Actions. The Board accepted the report as presented.

Board Chair's Report – B. Malphus

No report presented

Miscellaneous

1) Ethics & Boundaries Assessment Services (EBAS) Orientation Workshop Report - John Sundstrom

Dr. Sundstrom recently attended the Ethics and Boundaries Assessment Services (EBAS) Orientation Workshop and provided the Board with information in reference to the Ethics and Boundaries Essay Examination. He indicated that he thought it would be a good tool for the Board to utilize in disciplinary matters even if the questions do not include veterinary cases as the case scenarios are written in such a way that any licensed professional can determine the legal and ethical dilemmas in order to write an essay in response. He reported that there were two veterinarians present at the workshop. Dr. Bohn indicated that with the cost of the examination being \$1500.00, the Board may want to consider keeping that in mind when assessing the fine amount to impose on a licensee who violates the law or rule if the Board moves forward with using the tool. Dr. Corry asked if the Board could see an example of the test. Dr. Malphus indicated that some of the types of questions on the test were provided in the summary that Dr. Sundstrom provided to the Board. Dr. Sundstrom indicated that he will attempt to get a copy of a test and send it to the board members.

Dr. Corry made a motion, Dr. Bohn seconded, and the Board voted to enter into Executive Session in accordance with O.C.G.A. §43-1-19(h)(2) and 43-1-2(k) to deliberate on enforcement matters and to receive information on investigative reports and the Assistant Attorney General's report. Voting in favor of the motion were those present who included Dr. Malphus, Dr. Bohn, Dr. Corry, Dr. Davis, Dr. Sundstrom, and Mr. Smith.

At the conclusion of Executive Session on Wednesday, August 12, 2015, Dr. Malphus declared the meeting to be “open” pursuant to the Open and Public Meeting Act O.C.G.A. § 50-14-1 et seq. No votes were taken during executive session.

EXECUTIVE SESSION

Executive Session Board Minutes

1) June 17, 2015 Board Meeting

Dr. Sundstrom motioned, Dr. Davis seconded and the Board voted unanimously in favor of the motion to approve the June 17, 2015 executive session minutes.

2) August 11, 2015 Investigative Committee

Dr. Sundstrom motioned, Dr. Davis seconded and the Board voted unanimously in favor of the motion to approve the August 11, 2015 executive session IC minutes.

Attorney General’s Report – A. Baker

Dr. Corry motioned, Dr. Davis seconded and the Board voted unanimously in favor of the motion to accept the Attorney General’s report as presented.

Investigative Committee Report – E. Davis and B. Malphus

Mr. Smith motioned, Dr. Davis seconded and the Board voted unanimously in favor of the motion to accept the following recommendations made in Executive Session:

Investigative Interviews:

There were no interviews conducted

Discussion Cases:

- VET090104 Allow the respondent thirty (30) additional days to pay the associated administrative fees as outlined in the order. If the respondent fails to pay the fine, refer to the Attorney General's Office for a Public Consent Order with a \$350 fine.
- VET100021 Notify the respondent that the Consent Agreement terminated in 2010 and close the case.
- VET120043 Respondent failed to complete requirements of the mitigating circumstances letter. Investigative Committee now recommends that the case be referred to the Attorney General's office for Public Consent Order with a fine of \$500 for unprofessional conduct if the respondent fails to complete the requirements within thirty (30) days.
- VET140063 Refer case to peer reviewer.
- VET120058 Send a mitigating circumstance letter to request five (5) hours of continuing education in client communication and five (5) hours of continuing education in critical care.
- VET140043 Send letter of concern regarding advertising. Notify the respondent that twenty-four (24) hour care must be available if advertising the same. Otherwise remove the statement of availability from all advertising, signs, etc.
- VET160011 Update referral to Investigations to determine the name of the drug company respondent is using to acquire medications. Also, question the respondent on the use of medications for personal use and seek copies of all drug order invoices from January 2013 to present.
- VET150006 Close the complaint finding no violation in the standard of care.
- VET160002 Refer complaint to the Attorney General's office for an expedited Outpatient Mental and Physical Examination.
- VET140051 Refer the case to Investigations to seek a Cease and Desist Order from the respondent; once secured, close complaint.
- VET150033 Send a strong letter of concern to the respondent and refer the case and complaint documents to the Department of Agriculture regarding inaccurate information on Health Certificates and release the case file.
- VET150055 Follow policy and refer to Attorney General’s Office for Public Consent Agreement for noncompliance with Board rule 700-7-.03 with a fine of \$200.
- VET150061 Refer to suggested Peer Reviewer. Upon receipt of the report, schedule Investigative Interviews for the respondents.
- VET160003 Records support that respondent advised client of all treatment options and that complainant would not allow recommended treatment. Close complaint with a no violation of standard of care letter.
- VET160004 Request an Investigative Interview with the respondent. Dr. Corry abstained from the vote.
- VET160005 Send letter of concern to the respondent stressing more thorough work up of chronic cases and to offer and document aggressive diagnostics earlier in care. Improve client communications to include notifying clients of off label uses of medications and side effects, and obtaining client documented consent. Refer to Board Rule 700-12-.04 regarding minimum standards of what information should be reflected in the medical records as the records provided are inadequate.
- VET160007 Close the case as the Board has no jurisdiction.

VET160008 Close the case as the Board has no jurisdiction.

VET160010 Close the case as the Board has no jurisdiction.

Miscellaneous Cases:

VET150060 Notify the Attorney of the requirements as outlined by the Board during their review of the application at the Investigative Interview in June, 2015.

Applications for Board Review Dr. Bohn motioned, Dr. Corry seconded and the Board voted unanimously in favor of the motion to accept the following recommendations made in Executive Session:

- 1) C.J.K. Approve for licensure.
- 2) D.E.R. Approve for renewal of licensure.
- 3) K.C.W. Request a detailed employment history for the last four (4) years and CE documents. Upon receipt of the documents, refer application to the Cognizant for review to determine if license should be issued.
- 4) J.P.V. Approve for licensure.
- 5) S.L.N.O. Approve for licensure.
- 6) G.H.M. Request a detailed employment history for the last five (5) years and the applicant must take the NVBME exam specific to his/her veterinary practice whether small animal, large animal or both.
- 7) A.J.F. Refer to Legal Services to issue a Private Consent Agreement for Reinstatement of Licensure with a \$200 fine per year of unlicensed practice to include language that the continuing education hours submitted with the application or to satisfy the terms of the agreement cannot be applied towards the requirements for any subsequent renewals.
- 8) S.D.S. Refer to Legal Services to issue a Private Consent Agreement for Reinstatement of Licensure with a \$200 fine per year for unlicensed practice to include language that the continuing education hours submitted with the application or to satisfy the terms of the agreement cannot be applied towards the requirements for any subsequent renewals.

Miscellaneous Discussions:

1) **Media Advisory of Attorney General Olen' Statement on Supreme Court Decision on Same Sex Marriage**
The Board discussed the media statement and indicated that the matter only affects the Board in that when the Board receives name changes for same sex couples with proper documents, it must be honored.

2) **Repeat Offenses**

Dr. Davis inquired as to what progressive measures the Board can do when it is documented that veterinarian has a history of abuse and is suspected of abuse again. Ms. Baker, Sr. Assistant Attorney General informed the Board that they may take into consideration a pattern of behavior and may choose to revoke or further discipline the license.

Adjournment No further business was discussed and the meeting adjournment at 1:02 p.m.

Minutes recorded by: Tamara Elliott, Board Support Specialist

Minutes reviewed and edited by: Kathy Osier, Licensing Supervisor and Adrienne Price, Executive Director

Minutes approved on: October 21, 2015

BECKEY MALPHUS, DVM
BOARD PRESIDENT

ADRIENNE PRICE
EXECUTIVE DIRECTOR